

Work Order ID 88664

88664

Page 1

July-30-12 10:21:26 AM

Item ID: D3916-5

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: Light Rib

Stop ***NS2***

Start Date: 30/07/2012 Start Qty: 4.00

(6)
4
4

Cust Item ID:

Required Date: 13/08/2012 Req'd Qty: 4.00

Customer:

Reference:

Approvals:

Process Plan: MLJ

Date: 12/07/30 Tooling:

Date:

Run Start ***NR1***

QC:

Date: SPC (Y/N):

Date:

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | *Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|---------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|---------------|---------------|---------------|------------------|----------------|

Draw Nbr

Revision Nbr

D3916

A

100

0.00

100

Large Fab

Memo

0.00

Large Fab

1- Cut tube 50"
2- Bend tube with manuel pipe bender as per DT9566
*** Make line at 9.00" annd use jig for other line***
3- Trim access tube material to finish size as per dwg D3916

(6) SAO 13.04.29

110

QC6- Inspect dimensions to drawing

0.00

110

QC

Memo

0.00

Quality Control

6x SA 13.04.30

120

Identify as per dwg & Stock Location:

0.00

120

Packaging

Memo

0.00

Packaging

6x SA 13.04.30

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--------------------------------------------------------------|------|------|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|--------------|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

Work Order ID 88664

88664

Page 2

July-30-12 10:21:26 AM

Item ID: D3916-5

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Light Rib

Stop

NS2

Start Date: 30/07/2012 Start Qty: 4.00

4

Cust Item ID:

Required Date: 13/08/2012 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

QC21- Final Inspection - Work Order Release

0.00

130

QC

Memo

0.00

Quality Control

13/5/3
13-05-1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--------------------------------------------------------------|-------------|-------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|---------------------|--|--|
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| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

Picklist Print

July-30-12 10:21:30 AM

Page 1

Work Order ID: 88664

88664

Parent Item: D3916-5

D3916-5

Parent Item Name: Light Rib

Start Date: 30/07/2012

Required Date: 13/08/2012

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP RevA: new issue DD 09.11.23 verified by:EC
as per dwg revA 10.03.15 verified by:EC

IPP Rev:B

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| M304TS0.500W.049 | | Purchased | No | | | 100 | f | 1,049.099 | 4.166 | 17.54105 | | | |

M304TS0 500W 049

Square Tubing

**

SAD 13-04-29

Location

Loc Qty

Loc Code

MAT018

644

122413

644

MAT034

405.0995823

118460

0.00001534

121328

2.059994

121565

20.775743

121808

382.26383

m122938

26.3116

NCR: Yes / No

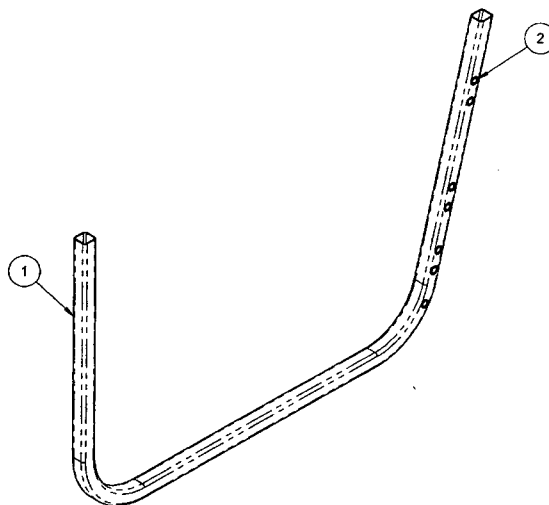
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

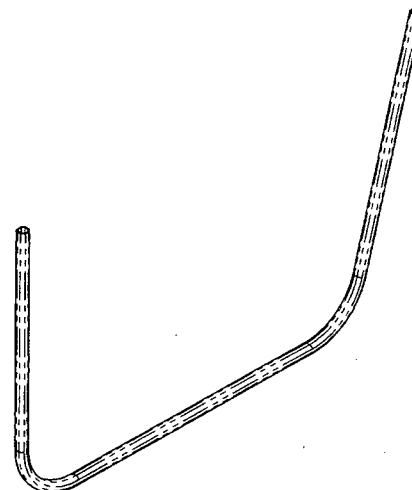
QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
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| Doc/Data | | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | | |
| Operator | | | | | | | | | | | |
| Material | | | | | | | | | | | |
| Setup | | | | | | | | | | | |
| Other | | | | | | | | | | | |
| Process | | | | | | | | | | | |
| Supplier | | | | | | | | | | | |
| Training | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
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| ITEM | QTY -041 | P/N | DESCRIPTION |
|------|-------------|-----------|-------------|
| | X | D3916-041 | RIB ASSY |
| 1 | 1 | D3916-1 | RIB |
| 2 | 7 | D3759-1 | BUSHING |



D3916-041 RIB ASSY



D3916-5 LIGHT RIB

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 88664 MLJ
12/07/30

OK 10.12.21
UNDER REVIEW
ADDITION OF HOLE + BUSHING
ON D3916-041-1 RIBS.
RELEASED
2010-03-12
JMP

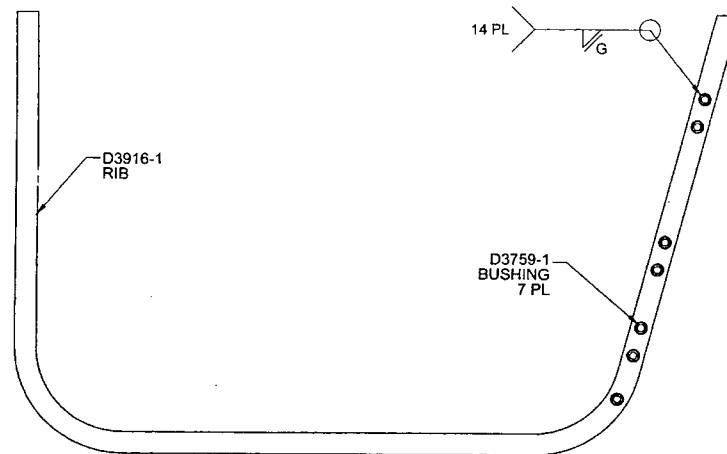
| | | | |
|------------|-------------|-----|----------|
| A | NEW ISSUE | JPH | 10.03.04 |
| REV. | DESCRIPTION | BY | DATE |
| DESIGN | AJS | | |
| DRAWN | JPH | | |
| CHECKED | | | |
| MFG. APPR. | | | |
| APPROVED | | | |
| DE APPR. | | | |
| DATE | 10.03.04 | | |

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D3916** REV. A
SHEET 1 OF 4
TITLE **RIB ASSY, 350 BASKET** SCALE NTS

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WRITTEN PERMISSION FROM DART AEROSPACE LTD.

88664



D3916-041 RIB ASSY

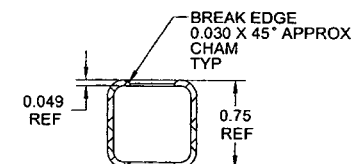
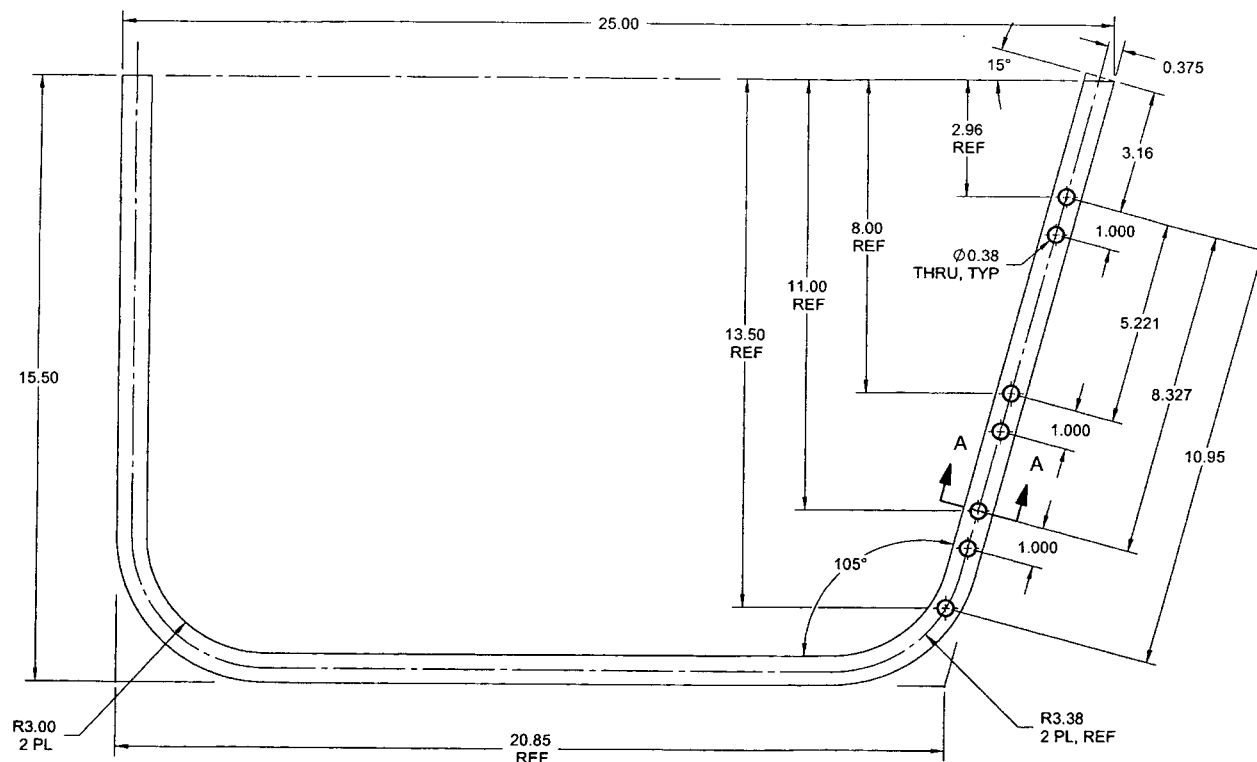
RELEASED
2010-03-12
JMP

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT -041: 1.84 lbs
- 8) WELD PER DART QSI 004

| | | | |
|------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN | AJS | DART AEROSPACE LTD | |
| DRAWN | JPH | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | <i>[Signature]</i> | DRAWING NO. | REV. A |
| MFG. APPR. | <i>[Signature]</i> | D3916 | SHEET 2 OF 4 |
| APPROVED | <i>[Signature]</i> | TITLE | SCALE |
| DE APPR. | <i>[Signature]</i> | RIB ASSY, 350 BASKET | NTS |
| DATE | 10.03.04 | <small>COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE, OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small> | |

88664



SECTION A-A

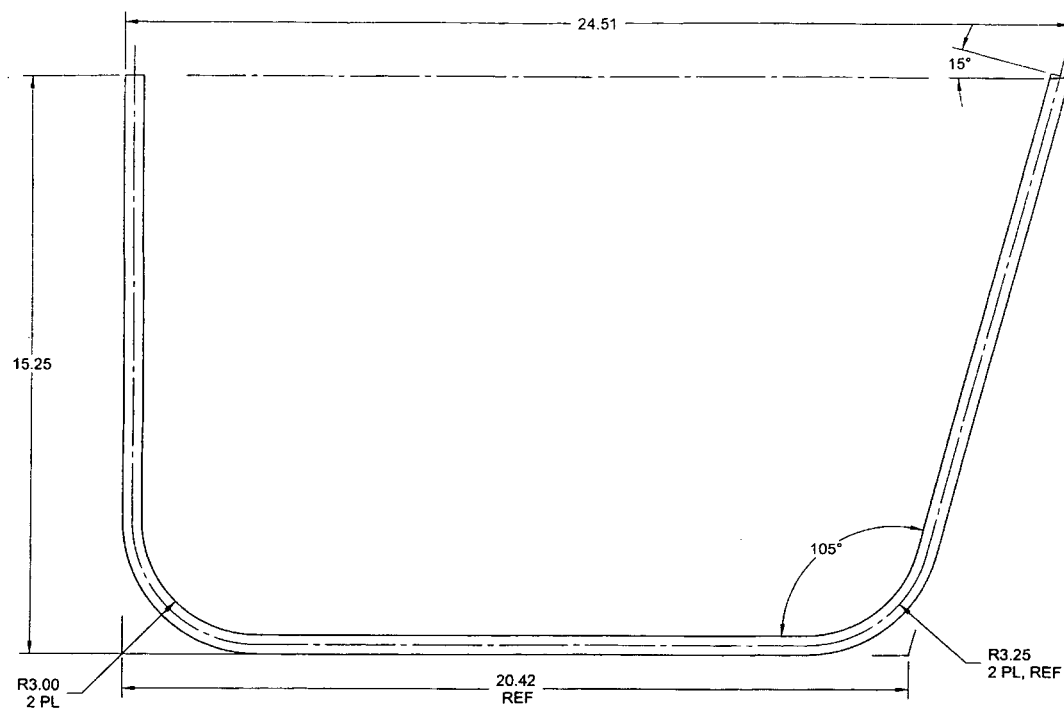
RELEASED
2010-03-12
NAP

NOTES:

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SQUARE TUBE, 0.75 X 0.75 X 0.049 WALL
REF DART SPEC. M304TS0.750W.049
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 1.76 lbs
- 9) TUBE FLAT LENGTH 50.0 REF

| | | | |
|------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN | AJS | DART AEROSPACE LTD | |
| DRAWN | JPH | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | <i>[Signature]</i> | DRAWING NO. | REV. A |
| MFG. APPR. | <i>[Signature]</i> | D3916 | SHEET 3 OF 4 |
| APPROVED | <i>[Signature]</i> | TITLE | SCALE |
| DE APPR. | <i>[Signature]</i> | RIB ASSY, 350 BASKET | NTS |
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22664



9 D3916-5 LIGHT RIB

RELEASED
2010-03-12

NOTES:

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SQUARE TUBE, 0.50 X 0.50 X 0.049 WALL
REF DART SPEC. M304TS0.500W.049
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 1.07 lbs
- 9) TUBE FLAT LENGTH 49.5 REF

| | | | |
|------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN | AJS | DART AEROSPACE LTD | |
| DRAWN | JPH | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | <i>[Signature]</i> | DRAWING NO. | REV. A |
| MFG. APPR. | <i>[Signature]</i> | D3916 | SHEET 4 OF 4 |
| APPROVED | <i>[Signature]</i> | TITLE | SCALE |
| DE APPR. | <i>[Signature]</i> | RIB ASSY, 350 BASKET | NTS |
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